

Corres. and Ma:

Response Under 37 CFR § 1.116 Expedited Procedure - Group 3713

ECELL TOO

Docket No.

00862.021871.

Examiner: J. Hotaling

Group Art Unit: 3713

Date: June 16, 2004

In re Application of:

MASAO OKADA et al.

Application No.: 09/537,288

Filed: March 29, 2000

For: ANIMATION DISPLAY APPARATUS.

ARCADE GAME MACHINE, CONTROL METHOD AND APPARATUS THEREOF,

AND STORAGE MEDIUM

Mail Stop AF THE COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment After Final Rejection in the above-identified application.

No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 15	MINUS	**	= 0	x \$9 \$18	0
INDEP. CLAIMS	* 5	MINUS	*** 20	= 0	x \$43 \$86	0
Fee for Multiple Dependent claims \$145°/\$290						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						-0-

If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

I hereby certify that this correspondence is being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 on

June 16, 2004 (Date of Deposit)

Frank L. Cire, Reg. No. 42,419

June 16, 2004 Date of Signature

	Verified Statement claiming small entity status is enclosed, if not filed previously.		
	A check in the amount of \$ is enclosed.		
	Charge \$ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.		
X	Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.		
X	A check in the amount of \$420.00 to cover the fee for a two-month extension is enclosed.		
	A check in the amount of \$ to cover the Information Disclosure Statement fee is enclosed.		
X	Applicants' undersigned attorney may be reached in our Costa Mesa, CA office at (714) 540-8700. All correspondence should continue to be directed to our address given below.		
	Respectfully submitted,		
	Attorney for Applicants		
	Registration No. 42,419		
FITZPATRICK, CELLA, HARPER & SCINTO 30 Rockefeller Plaza New York, New York 10112-3800 Facsimile: (212) 218-2200			
Form #	¥120		

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